F19000005289

| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Business Entity Harrie) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
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Office Use Only



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2024 NOV 19 AM II: 01

KECETVED

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 735081 8181483

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: October 31, 2024

ORDER TIME : 2:25 PM

ORDER NO. : 735081-025

CUSTOMER NO: 8181483

CHANGE OF AGENT

NAME: PARKLAND (U.S.) SUPPLY CORP.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller

EXAMINER'S INITIALS: _____

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of char | nge is submitted for a corporation or, | 0502, 607.1508, or 617.1508, Florida Statutes, the ganized under the laws of the State of Delaware | is |
|--|--|--|---------------------------------------|
| | | gistered agent, or both, in the State of Florida. | |
| 1. The name of t | he corporation: PARKLAND (U.S.) | SUPPLY CORP. | |
| 2. The principal | office address: 2800 Post Oak Boule | evard, Suite 5200, Houston, TX 77056 | |
| 3. The mailing a | ddress (if different): | | |
| 4. Date of incorp | poration/qualification: 11/25/2019 | Document number: F19000005289 | |
| 5. The name and Florida Depar | I street address of the current registere timent of State: (If resigned, enter resigned) | | |
| | C T Corporation System | | 2024 |
| | 1200 South Pine Island Road | TALLAWASSEE | AON |
| | Plantation, FL 33324 | ASSE | <u>19</u> [|
| 6. The name and (if changed): | d street address of the new registered | agent (if changed) and /or registered office | 2024 NOV 19 AM 11: 01 |
| | Corporation Service Company | Oc | = |
| | 1201 Hays Street | | |
| | P.C | D. Box NOT acceptable | |
| | Tallahassee | FL 32301 | |
| The street address changed will | ess of its registered office and the st be identical. | reet address of the business office of its register | ed agent, |
| Such change wanthorized by the | as authorized by resolution duly add he board, or the corporation has bee | opted by its board of directors or by an officer so in notified in writing of the change. |) |
| /s/ Tariq R | | Tariq Remtulla, Senior Vice President & Se | |
| Signan I hereby accept I further agree of my duties, ar | the appointment as registered ager | Printed or typed name and little at and agree to act in this capacity. statutes relative to the proper and complete per cobligation of my position as registered agent. in the registered office address, I hereby confirm | formance Or, if this n that the |
| Corporatio | n Service Company | 11/19/2024 | |
| By: | gnature of Registered Agent | Date | |
| If signing on be | ehalf of an entity: | | |
| | er, Asst. Vice President | | |
| ٦ | Typed or Printed Name * * * FILIN | G FEE: \$35.00 * * * | |
| | <u> </u> | FLORIDA DEPARTMENT OF STATE | |
| N. | AND TO DIVISION OF CORPORATION | US P.O. BOX 6327, TALLAHASSEE, FL 32314 | |

CR2E045 (04/13)

CSC 735081